Approved for use through 7/3 1/2008, OLD 0651-052

• •		PATENT A	PPLIC	TION E	EE DE	required to a	Spand :	o a godaci	ob of Pi	redemark contailon u	Office; U.	L DEPARTME	NT OF COM	11-05	
	PATENT APPLICATION FEE DETERMINATION RE Substitute for Form PTO-876								ECORD			Application of Dayles (Number			
	CLAIMS AS FILED - PART I											4-0111123			
		• • •	• •					1,12							
	FOR	. —	(Cotum		(Cotumn 2)			81	MLL E	YIIIN	. OR	OT	HER THAN	Į	
	BASIC FEE		HUMBER FILED			NUMBER EXTRA		RAT			7	SM	AT ENILL	r _	
	(07 OFR 1.16(a)							100	-	- FEE	4	RATE			
	(37 OFR 1.18(a)		colinus 20 a				$\dashv$	-		<u> 305.6</u>	OR		1790		
	POEPENDENT CLAIMS (37 OFR 1.18(b))							× tal	2.	1.	7	× 50	1500	7.00	
			minus 3 =		•		_	x eta	5.1		OR				
ŀ	MULTIPLE DEPENDENT CLAIM PRESENT (F7 OFR L16(d))								5. 1	<u> </u>	OR	x 200.			
- 1	" if the difference in column. 1-to less than zero, enter "0" in column 2.							731.01	4		. OR	+360	1		
1	CLAIMS AS AMENDED - PART II							TOTA	ιL	<u> </u>	OR	TOTAL	1	$\dashv$	
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. _	FRET PRESENTATION OF MULTIPLE DEPONDENT CLASM (87 OFR 1.19(8))							×1/00	-		OR	× 200		1.	
1.	1.10	( to the residual )						180			OR'	+860	<del></del> :	┨.	
	11111195			•	<b>,</b>		. }	TOTAL VOO'L FEE			OR	TOTAL	<del></del>	1.	
a	The same of the sa	(Column 1) CLAMS	·		400 Z)	(Column 3)					OR ,	ADD'L FEE		]	
		REMAINING	1	HIGH	BER	PRESENT	1 r	-	<b>T</b>						
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ပ္		CLAMS REMAINING.		HIGHE	8T ·	Column 3)	-				•		المحا		
Z	•	AFTER		PREVIOU	30 I C	PRESENT EXTRA		RATE	ADD						
Ž	Total (27 OFR 1.16(a))	AMENDMENT	Minus	PADE	DR ·				TION	u i	1		ADDI		
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当	FIRST PRESENTATION OF AULTIPLE DEPENDENT CLASM (87 CFR. 1.16(d))						1×,4	100	•	OF	1×	RODI	:		
:		•					140	10		OR		260			
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444	u the Highest M If the Highest M	umn 1 is less that umber Previously umber Previously p uber Previously P	Paid For	WTHIS SPA	CE b les	di Ophygan i. S Chan 20	د خواند	<i></i> <del></del>	٠ د	OR	ADD	LFEE		.•	
	The Highest Nu	riber Previously P	ald For 17	n THIS SPA	CE is les	s than 2, ente	#¥[•2]. ¥ 3.		~		17mm	: '	-		

The Highest Number Previously Paid For N THIS SPACE is less than 3, enter 3.

The Highest Number Previously Paid For (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to the fand by the public which is to the fand by the public which is to the fand by the factoring gathering, preparing, and sutmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS